CATERING ENDORSEMENT APPROVAL

Event Date:	Time:	Place:
Description of Event:		
		900
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	100	
I approve/disapprove (circle one) of the event described above.		I approve/disapprove (circle one) of the event described above.
Local Health Official Signature		Local Law Enforcement Signature
Date		Date